



Docket No.: 4710-0105P  
(PATENT)

*IN THE UNITED STATES PATENT AND TRADEMARK OFFICE*

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In re Patent Application of:  
Shoji ICHINOHE

Application No.: 10/752,501

Confirmation No.: 5138

Filed: January 8, 2004

Art Unit: 1712

For: HIGHLY PURE POLYETHERSILICONE

Examiner: PENG

**AMENDMENT IN RESPONSE TO FINAL OFFICE ACTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

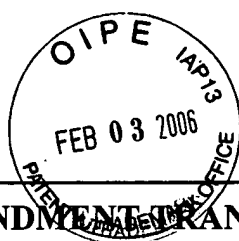
Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated November 3, 2005, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.



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AF

AMENDMENT TRANSMITTAL LETTER			Docket No. 4710-0105P	
Application No. 10/752,501-Conf. #5138		Filing Date January 8, 2004	Examiner K. L. Peng	Art Unit 1712
Applicant(s): Shoji ICHINOHE				
Invention: HIGHLY PURE POLYETHERSILICONE				
<b>MS Amendment</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	3	- 20 =		x
Independent Claims	1	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Gerald M. Murphy, Jr. Attorney Reg. No.: 28,977			Dated: <u>February 3, 2006</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000				